

28  
9-21-00

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SML		8/7/00
O.I.P.E. CLASSIFIER	43		8/14/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final	7/2/00
Original	7/2/00
1	✓✓✓
2	✓✓✓
3	✓✓✓
4	✓✓✓
5	✓✓✓
6	✓✓✓
7	✓✓✓
8	✓✓✓
9	✓✓✓
10	✓✓✓
11	✓✓✓
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44	✓✓✓
45	✓✓✓
46	✓✓✓
47	✓✓✓
48	✓✓✓
49	✓✓✓
50	✓

Claim	Date
Final	7/2/00
Original	7/2/00
51	✓✓✓
52	✓✓✓
53	✓✓✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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